

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**CARSON AMERICA**

**A. Full Name (Last, First, Middle Initial)**

**LOIS BLUMENSTIEL**

Mailing Address 1907 WOODLANDS PLACE

City	State	Zip Code
POWELL	OH	43065-7461

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

**Transaction ID : SA17.611769**

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

100.00

**B. Full Name (Last, First, Middle Initial)**

**WILLIAM BLUNT**

Mailing Address 963 REEDS LANE

City	State	Zip Code
VICKSBURG	MI	49097-9724

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17.394565**

Date of Receipt

M M / D D / Y Y Y Y  
08 / 31 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

250.00

**C. Full Name (Last, First, Middle Initial)**

**RAYMOND BLY**

Mailing Address 29330 NE BIG ROCK ROAD

City	State	Zip Code
DUVALL	WA	98019-7322

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

304.00

**Transaction ID : SA17.256127**

Date of Receipt

M M / D D / Y Y Y Y  
07 / 16 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

100.00

**Subtotal Of Receipts This Page (optional)**.....

450.00

**Total This Period (last page this line number only)**.....